

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Dayton Independent Board of Education Street Address 200 Clay St City, State Zip Dayton, KY 41074	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$925,399 (Dayton Ind. Middle \$440,019/Dayton Ind. High \$485,380)	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Fayette County Board of Education Street Address 701 E Main St City, State Zip Lexington, KY 40502	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$905,400 (District \$245,817/Bryan Station High School \$659,583)	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Fleming County Board of Education Street Address 211 W Water St City, State Zip Flemingsburg, KY 41041	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$554,485 Fleming County High School	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Hopkins County Board of Education Street Address 320 S Seminary St City, State Zip Madisonville, KY 42431	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$411,176 Hopkins Central High School	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Jefferson County Board of Education Street Address PO Box 34020 City, State Zip Louisville, KY 40232	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$856,446 District \$372,517/Myers Middle \$96,216/Olmstead Academy \$97,185/Stuart Middle School \$97,185/Thomas Jefferson Middle \$94,655/Westport Middle \$98,688	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Division of Consolidated Plans and Audits</div>		Date: July 1, 2014

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Knox County Board of Education Street Address 200 Daniel Boone Dr City, State Zip Barbourville, KY 40906	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$619,689 Knox Central High School	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Lee County Board of Education Street Address PO Box 668 City, State Zip Beattyville, KY 41311	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$167,304 Lee County High School	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

REVISED Award Notification

1	Name and Address of Recipient: Agency Name Lincoln County Board of Education Street Address PO Box 265 City, State Zip Stanford, KY 40484		2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A		9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
			10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85		11	Evaluations:
5	Revised Award Amount: \$469,767 Lincoln County High School			
6	Period of Award: July 1, 2014 – September 30, 2017			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.			
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans and Audits		Date: March 25, 2015	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Livingston County Board of Education Street Address PO Box 219 City, State Zip Smithland, KY 42081	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$591,924 Livingston Central High School	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Perry County Board of Education Street Address 315 Park Ave City, State Zip Hazard, KY 41701	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$445,095 (District \$62,080/Perry County Central High School \$383,015)	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Pulaski County Board of Education Street Address PO Box 1055 City, State Zip Somerset, KY 42502	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$174,392 (District \$41,283/Pulaski County High School \$133,109)	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Simpson County Board of Education Street Address PO Box 467 City, State Zip Franklin, KY 42135	2	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$746,138 Franklin-Simpson High School	11	Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.		
14	Authorized By (Name/Title): Donna Tackett, Director <div style="text-align: right;">Date: July 1, 2014</div> <div style="text-align: center;">Division of Consolidated Plans and Audits</div>		

REVISED Award Notification

1	Name and Address of Recipient: Agency Name Trimble County Board of Education Street Address PO Box 275 City, State Zip Bedford, KY 40006	2 Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant–Phone # David Millanti - 502-564-3791 ext. 4060 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Vickie Terry - 502-564-1979 ext. 4330 Street Address 500 Mero St., 16 th Fl., CPT City, KY Zip Frankfort, KY 40601	8 Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Title I, School Improvement Funds Fund Source Title I, Part A Section 1003 (g) CFDA# 84.377A MUNIS Project Number 4604 Master Agreement Number N/A	9 Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB, Title I, Part A Section 1003(g), 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81,82 and 85	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission: CDIP <input type="checkbox"/> Other _____
5	Revised Award Amount: \$234,736 (District \$174,316/Trimble County High School \$60,420)	11 Evaluations:
6	Period of Award: July 1, 2014 – September 30, 2017	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions: Any revisions to the budget or the plan should be sent to title1reports@education.ky.gov and must be approved prior to implementing changes. District will be reporting toward meeting annual goals on a quarterly basis. The final Federal Cash Request must be submitted December 8, 2017.	
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans and Audits	Date: March 25, 2015